

CalHome Program

Application for General Program Funding NOFA

Mortgage Assistance * Owner-Occupied Rehabilitation

California Department of Housing and Community Development
Financial Assistance Division
P.O. Box 952054, Sacramento, CA 94252-2054
916-327-3646

This application, if approved for funding, will be a part of your Standard Agreement with the Department of Housing and Community Development (HCD). In order to be considered for funding, all sections of this application, including attachments and exhibits, must be complete and accurate. **Application forms must not be modified.** No facsimiles, incomplete applications, or application revisions will be accepted prior to, or after the application deadline. Applications must meet all eligibility requirements upon submission. Applications containing material internal inconsistencies will not be rated and ranked. Use **Exhibit A**, Attachment Checklist, as an aid in completing the application. HCD must receive in its office a complete original application in a three ring binder **no later than 5:00 P.M. Wednesday, April 18, 2007.**

For purpose of this NOFA, this will be a Program NOFA which will include first-time homebuyer mortgage assistance activities and owner-occupied activities. A separate CalHome Project NOFA to support the development of new homeownership housing will be release separately in the coming months. **Please note:** applicants are still only eligible to apply for either a CalHome Program Grant or a CalHome Project Grant. Therefore, if an applicant for this NOFA receives an award of funds, they will not be eligible to apply for funds under the upcoming 2007 CalHome Program Development Project NOFA.

SECTION I. APPLICATION SUMMARY:

- A. Name of Applicant: _____
- B. Applicant Address: _____
City: _____ Zip Code: _____
- C. Chief Executive Name and Title: _____
- D. Contact Person Name and Title: _____
- E. Phone Number: _____ FAX: _____ E-Mail: _____
- F. Proposed Activity: _____

You may apply for one or two program activities, the aggregate amount of both activities may not exceed the maximum application amount, and the amount for any one activity may not be less than the minimum activity amount, as specified in the NOFA. Localities shall only be eligible to apply for an award of CalHome funds for a local program within its jurisdictional boundaries. A nonprofit corporation may propose programs in a county or counties in which they have operated a housing program within the past 4 years, or in a county or counties for which the nonprofit corporation has an existing 523 technical assistance services agreement with the United States Department of Agriculture.

Activity: Submit Appropriate Attachment Number	No.of CalHome Assisted Units Proposed	County or Counties of Activity	Census Tracts if Proposing 100% Rural Activity*
1. FTHB Mortgage Assistance Program			
2.Owner-Occupied Rehabilitation Program			
Total			

* If your activity will be located entirely within a rural census tract or non-metro county as defined in the CalHome Program Regulations and you want to receive consideration for the rural set-aside, you must provide the census tract or list the non-metro county information in the table above. This information can be found in Appendix A in the training manual.

G. Proposed Grant Amount: *\$_____

* If the grant request is over \$600,000 (up to \$1,000,000), the city, county or nonprofit will need to provide the following: The name of the city or unincorporated areas of counties with a population of over 400,000. If a County operates their programs in the small cities within the county as well as the unincorporated areas, we will allow the aggregate population of the unincorporated areas plus these small cities to be combined for determining the maximum award amount only where we have letters/resolutions from the included small cities verifying the County’s authority to operate with the cities. A list of cities and unincorporated areas of counties in California with population over 400,000 is included in this application labeled **Exhibit D**. Please provide the required documentation as **Attachment 3**.

H. Brief Description of Each Program Activity Applied for:

SECTION II. LEGISLATIVE REPRESENTATIVES:

A form is included in this application labeled **Exhibit B**. Please complete the information on this form and attach as **Attachment 5**.

SECTION III. GOVERNING BOARD RESOLUTION:

Attach the resolution, duly executed by the governing board of the local public agency or nonprofit corporation, granting authority to make an application to HCD for a funding commitment from the CalHome Program. Label as “**Attachment 6** Governing Board Resolution”. Please review the sample resolution which is included in this application package as **Exhibit C**. Be sure that the resolution authorizes a signatory for submittal of this application and the resolution is an action of the governing body of the applicant. If someone signs the application other than the person authorized in the resolution, submit evidence that shows that the person signing has the authorization to sign. Such evidence could be in the

form of an ordinance or code, or an opinion from the applicant's legal counsel. Include such authorization with **Attachment 6**.

SECTION IV. APPLICANT INFORMATION:

A. The applicant is a (check one): ☐ City ☐ County ☐ City and County ☐ Nonprofit Corporation

1. If a Nonprofit Corporation, Submit copies of:

IRS approval of 501(c) (3) status: as **Attachment 7a**

Secretary of State Letter of Good Standing: as **Attachment 7b**

Articles of Incorporation: as **Attachment 7c**

Bylaws: as **Attachment 7d**

List of names of Board of Directors as **Attachment 7e**

Financial Statements (for the last 2 fiscal years, one of which must be must be audited): as **Attachment 7f**

SECTION V. ACTIVITY ATTACHMENT:

Applicants must complete at least one attachment:

Attachment 1, First-Time Homebuyer Mortgage Assistance, or
Attachment 2, Owner-Occupied Rehabilitation Program

These attachments are part of this application. At least one must be completed and must be included or the application will not be complete and will be ineligible for funding consideration.

SECTION VI. APPLICANT CERTIFICATION AND COMMITMENT OF RESPONSIBILITY:

As the official designated by the governing body, I hereby certify that if approved by HCD for a CalHome Program funding allocation, the _____
(Applicant name) assumes the responsibilities specified in the CalHome Program Regulations and certifies that:

- A. It possesses the legal authority to apply for the allocation and to execute their proposed program or project;
- B. Before committing funds to a homebuyer/homeowner, it will evaluate the funding eligibility in accordance with CalHome Program Regulations and will not invest any more CalHome funds in combination with other governmental assistance than is necessary to provide affordable housing;
- C. The Applicant **does not** have any unresolved audit findings for prior HCD or federally-funded housing or community development projects or programs.
- D. There are **no** pending lawsuits that would impact the implementation of this program or project.
- E. It will comply with all statutes and regulations governing the CalHome Program.
- F. The information, statements, and attachments contained in this application are, to the best of my knowledge and belief, true and correct.
- G. It has the ability to perform the duties for the activity(s) applied for in accordance with Section 7718 of the CalHome Program Regulations.

I authorize the Department of Housing and Community Development to contact any agency, whether or not named in this application, which may assist in determining the capability of the Applicant. All information contained in this application is acknowledged to be public information. (This certification must be signed by the person authorized in the Resolution)

*Signature: _____ Title: _____

Type Name: _____ Date: _____

*Must be signed by authorized signatory per the resolution.

EXHIBIT A

Attachment Checklist

Please tab each attachment required by the application and place the attachments behind the completed application in a three ring binder according to the corresponding number listed below.

Check if Included	Att. No.	Attachment Title
	1	Program: First-time Homebuyer Mortgage Assistance Program
	2	Program: Owner-Occupied Rehabilitation Program
	3	Documentation regarding population over 400,000 for requesting funds over \$600,000 (up to \$1,000,000)
	4	Reserved
	5	Legislative List
	6	Copy of Resolution authorizing this application. As a time-saver, the Resolution may also authorize execution of the contract and other documents needed to process a loan
		Nonprofit corporations must provide the following information:
	7a	IRS approval of 501(c)(3) status
	7b	Copy of current certification of 501(c)(3) status with Secretary of State that is less than one year old
	7c	Copy of Articles of Incorporation
	7d	Copy of Bylaws
	7e	List of officers and Board of governing body of Applicant
	7f	Financial Statements (one of the last 2 years must be audited)

Exhibit B

LEGISLATIVE REPRESENTATIVES

Indicate all Legislators who represent any portion of the proposed service area. If you have vacancies in your legislative seats, please list your district number and district address.

A. Members of the State Assembly:

District number: _____	District number: _____
Name: _____	Name: _____
District _____	District _____
Address: _____	Address: _____
City: _____	City: _____
Zip Code: _____	Zip Code: _____

B. Members of the State Senate:

District number: _____	District number: _____
Name: _____	Name: _____
District _____	District _____
Address: _____	Address: _____
City: _____	City: _____
Zip Code: _____	Zip Code: _____

C. Members of the U.S. House of Representatives:

District number: _____	District number: _____
Name: _____	Name: _____
District _____	District _____
Address: _____	Address: _____
City: _____	City: _____
Zip Code: _____	Zip Code: _____

EXHIBIT C

SAMPLE GOVERNING BOARD RESOLUTION

RESOLUTION NO. _____

THE GOVERNING BOARD OF

(Title of Applicant)

HEREBY AUTHORIZES THE SUBMITTAL OF AN APPLICATION TO THE CALIFORNIA STATE DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT FOR FUNDING UNDER THE CALHOME PROGRAM; THE EXECUTION OF A STANDARD AGREEMENT IF SELECTED FOR SUCH FUNDING AND ANY AMENDMENTS THERETO; AND ANY RELATED DOCUMENTS NECESSARY TO PARTICIPATE IN THE CALHOME PROGRAM.

WHEREAS:

- A. _____ (name of applicant), a [political subdivision of the State of California or nonprofit public benefit corporation], wishes to apply for and receive an allocation of funds through the CalHome Program; and
- B. The California Department of Housing and Community Development (hereinafter referred to as "HCD") has issued a Notice of Funding Availability ("NOFA") for the CalHome program established by Chapter 84, Statutes of 2000 (SB 1656 Alarcon), and codified in Chapter 6 (commencing with Section 59650) of Part 2 of Division 31 of the Health and Safety Code (the "statute"). Pursuant to the statute, HCD is authorized to approve funding allocations utilizing monies made available by the State Legislature to the CalHome program, subject to the terms and conditions of the statute and the CalHome Program Regulations adopted by HCD on August 15, 2003; and
- C. The _____ (name of Applicant) wishes to submit an application to obtain from HCD an allocation of CalHome funds in the amount of \$_____.

IT IS NOW THEREFORE RESOLVED THAT:

1. The _____ (name of applicant) shall submit to HCD an application to participate in the CalHome Program in response to the NOFA issued on _____ which will request a funding allocation for the following activities:

(Briefly describe the proposed activities, including dollar amount of each)

located in _____
[Program/project location(s)]

2. If the application for funding is approved, the _____ (Name of applicant) hereby agrees to use the CalHome funds for eligible activities in the manner presented in the application as approved by HCD and in accordance with program regulations cited above. It also may execute any and all other instruments necessary or required by HCD for participation in the CalHome Program.

3. The _____ (name of Applicant) authorizes _____ [office or position titles of authorized person(s)] to execute in the name of the _____ (name of Applicant), the application, the Standard Agreement, and all other documents required by HCD for participation in the CalHome Program, and any amendments thereto.

PASSED AND ADOPTED THIS ____ Day of _____, 20 _____, by the following vote:

AYES: _____ NAYS: _____ ABSTAIN: _____ ABSENT: _____

The undersigned _____ (title of officer) of the _____ (name of Applicant) there before named does hereby attest and certify that the foregoing is a true and full copy of a resolution of the Governing Board adopted at a duly convened meeting on the date above-mentioned, which has not been altered, amended or repealed.

Signature

Date

NOTES:

1. This is intended to be a sample resolution authorizing submittal of an application to HCD. **Applicants may use their own format if it contains all of the authorizations contained in this sample.**
2. The sample resolution should be modified by nonprofit organizations as appropriate to meet the corporate structure of the nonprofit organization.
3. The **person attesting to the signing of the resolution cannot be the same person who is authorized to execute documents in the name of the applicant.**
4. The Resolution must be the original or a certified copy of the original.

EXHIBIT D

Cities and unincorporated areas of counties in California with population over 400,000.

- City of Los Angeles 3,864,400
- City of San Diego 1,275,100
- Unincorporated Los Angeles County 1,048,600
- City of San Jose 925,000
- City and County of San Francisco 791,600
- Unincorporated Sacramento County 616,700
- City of Long Beach 481,000
- Unincorporated Riverside County 465,800
- Unincorporated San Diego County 458,500
- City of Fresno 448,500
- City of Sacramento 433,400
- City of Oakland 412,200

In our current NOFA, these jurisdictions will be able to apply for an aggregate maximum award of \$1,000,000.

Regarding the situation where the County operates their programs in the small cities within the county as well as the unincorporated areas, we would allow the aggregate population of the unincorporated areas plus these small cities to be combined for determining the maximum award amount only where we have letters/resolutions from the included small cities verifying the County's authority to operate within the cities.

CalHome Program Application

Attachment 1

First-Time Homebuyer Mortgage Assistance Program

This Application form is for homebuyer mortgage assistance to first-time homebuyers of new or existing homes, or for purchase of existing homes to be rehabilitated by the homebuyer. An applicant may only apply for funds under this attachment when it will be providing the services required in Section 7729 of the program regulations.

SECTION I. APPLICANT INFORMATION

Name: _____

SECTION II. FIRST-TIME HOMEBUYER PROGRAM EXPERIENCE

- A. Provide the following information for each year of first-time homebuyer program operation for 12 consecutive months, by calendar year. Applicant organizations should only list those homebuyer units for which they provided the mortgage assistance services.

YEAR	PERMANENT FINANCING FUNDING SOURCE(S)	NO. OF PURCHASE ESCROWS UNDERWRITTEN AND CLOSED	AVERAGE AMOUNT OF ASSISTANCE PROVIDED PER BUYER
2006			
2005			
2004			
2003			
2002			
2001			
2000			
1999			
1998			
1997			

- B. For years 2003 through 2006, provide a narrative of applicant's history and experience with the proposed activity, including evidence of program operation for each year listed: e.g., board resolution authorizing the program; award letters; program financial pages from annual audit, annual reports or other evidence that will demonstrate program operation. **(Attach as Exhibit 1-1)**

SECTION III. LOAN UNDERWRITING EXPERIENCE

- A. For the years 2003 through 2006, the total number of homebuyer loans applicant has underwritten and closed, which included preparation of loan documents and escrow instructions. # _____

SECTION IV. LOAN SERVICING EXPERIENCE

- A. For the years 2003 through 2006, the total number of homebuyer loans closed for which the applicant was the named beneficiary on the loan documents. # _____
- B. As of the CalHome NOFA issuance date, the total number of homeowner loans in the applicant's portfolio. # _____
- C. Number of loans identified in B. above that are being directly serviced by the applicant. # _____
- D. Number of loans identified in B. above that are being serviced by a third party. # _____
- E. As of the CalHome NOFA issuance date, the total number of homebuyer loans the applicant is servicing for another entity. # _____
- F. If there are zero loans identified in C, D **and** E, submit a narrative identifying how loans will be serviced, how the servicing activities will be funded or provided and the procedures for implementing loan servicing operations. **In addition** to the narrative, attach either: 1) a budget that provides an identified source of financing, for a period of at least 5 years, for contracting loan servicing with a third party who is in the business of loan servicing; 2) a commitment letter from a third party, who is in the business of loan servicing, willing to provide loan servicing at no cost to the applicant; or 3) the résumé of a current employee(s) of the applicant that describes the employee(s)'s experience in homeowner loan servicing. **(Attach as Exhibit 1-2)**

SECTION V. PROGRAM TARGETING

- A. Number of homebuyers to be assisted with this application for CalHome funds # _____
- B. Program will be operated **entirely within a federally defined Qualified Census Tract(s) located in Appendix B in the training manual** (ONLY MARK YES IF ALL HOMES TO BE ASSISTED WITH CALHOME FUNDS SHALL BE LOCATED IN THE AREA(S) IDENTIFIED HERE):
Yes _____ No _____
Federally defined Qualified Census tract(s) No. _____
- C. Program will be operated **entirely within a designated redevelopment area under the jurisdiction of a local Redevelopment Agency** (ONLY MARK YES IF ALL HOMES TO BE ASSISTED WITH CALHOME FUNDS SHALL BE LOCATED IN THE AREA(S) IDENTIFIED HERE):
Yes _____ No _____
Attach a redevelopment area map and indicate program location on the map. **(Attach as Exhibit 1-3)**
- D. Nonprofit corporations must list the county or counties in which the program will be operated.
county/counties _____

E. Provide the data source used to project sales price:

SECTION VI. FINANCING AND AFFORDABILITY

A. Proposed Permanent Financing (other than CalHome) (check all that apply):

☐ Conventional ☐ FHA ☐ CalHFA ☐ USDA-Rural Development
☐ Federal HOME ☐ Redevelopment Agency ☐ Other

Describe the financing structure, first mortgage and any subordinate financing in addition to CalHome that will finance the purchase of the properties.

Source of Financing	Proposed Lien Position

B. Projected Average Housing Cost and Affordability:

1. Expected Average Sales Price, Less Homebuyer Equity: \$ _____
2. Less Average CalHome Mortgage Assistance to be given: \$ _____
3. Less Average Other Mortgage Assistance to be received, if any: \$ _____
4. Average First Mortgage: \$ _____
5. Estimated Monthly Payment on First Mortgage (PITI): \$ _____
6. Annual Income Needed to Support above Payment
(Based on the homebuyer paying 30% of gross annual income for PITI) \$ _____

SECTION VII. HOMEBUYER EDUCATION

A. Does the applicant currently provide homebuyer education classes?

Yes _____ No _____

SECTION VIII. BONUS POINTS

New Policy Objectives

A. Targeting higher density: Competitive points will be given in the scoring of this applicant for applicants that use their mortgage assistance loans exclusively for purchase transaction where the purchased are developed at a density of 15 units per acre or greater.

Yes _____ No _____

B. Targeting energy efficient homeownership: Competitive points will be given in the scoring of this application for applicants that use their mortgage assistance loans exclusively for transactions where the units purchased have been Energy-Star rated.

Yes _____ No _____

- C. Targeting homeownership units that meet universal design standards:** Competitive points will be given in the scoring of this application for applicants that use their mortgage assistance loans exclusively for home purchase transaction where the units purchased are developed by meeting the universal design standards.

Yes _____ No _____

CalHome Program Application

Attachment 2

Owner-Occupied Rehabilitation Program

This Application form is for rehabilitation of owner-occupied homes. An applicant may only apply for funds under this attachment when it will be providing the services required in Section 7733 and Section 7735 of the program regulations.

SECTION I. APPLICANT INFORMATION

Name: _____

SECTION II. OWNER-OCCUPIED REHABILITATION PROGRAM EXPERIENCE

- A. Provide the following information for each year of owner-occupied rehabilitation program operation for 12 consecutive months, by calendar year. Applicant organizations should only list those rehabilitated units for which they provided the rehabilitation services including loan underwriting and escrow closing.

YEAR	FUNDING SOURCE(S)	NO. OF HOME REHABILITATIONS COMPLETED	NO. OF ESCROWS CLOSED BY APPLICANT ORGANIZATION	AVERAGE AMOUNT OF ASSISTANCE PROVIDED PER OWNER
2006				
2005				
2004				
2003				
2002				
2001				
2000				
1999				
1998				
1997				

- B. For years 2003 through 2006, provide a narrative of applicant's history and experience with the proposed activity, including evidence of program operation for each year listed: e.g., board resolution authorizing the program; award letters; program financial pages from annual audit, annual reports or other evidence that will demonstrate program operation. **(Attach as Exhibit 2-1)**

SECTION III. LOAN UNDERWRITING EXPERIENCE

- A. For the years 2003 through 2006, the total number of homeowner rehabilitation loans applicant has underwritten and closed, which included preparation of loan documents and escrow instructions. # _____

SECTION IV. LOAN SERVICING EXPERIENCE

- A. For the years 2003 through 2006, the total number of all types of homeowner rehabilitation loans closed for which the applicant was the named beneficiary on the loan documents. # _____
- B. As of the CalHome NOFA issuance date, the total number of homeowner rehabilitation loans in the applicant's portfolio. # _____
- C. Number of loans identified in B. above that are being directly serviced by the applicant. # _____
- D. Number of loans identified in B. above that are being serviced by a third party. # _____
- E. As of the CalHome NOFA issuance date, the total number of homeowner loans the applicant is servicing for another entity. # _____
- F. If there are zero loans identified in C, D **and** E, submit a narrative identifying how loans will be serviced, how the servicing activities will be funded or provided and the procedures for implementing loan servicing operations. **In addition** to the narrative, attach either: 1) a budget that provides an identified source of financing, for a period of at least 5 years, for contracting loan servicing with a third party who is in the business of loan servicing; 2) a commitment letter from a third party, who is in the business of loan servicing, willing to provide loan servicing at no cost to the applicant; or 3) the résumé of a current employee(s) of the applicant that describes the employee(s)'s experience in homeowner loan servicing. **(Attach as Exhibit 2-2)**

SECTION V. PROGRAM TARGETING

- A. Number of homeowners to be assisted with this application for CalHome funds # _____
- B. Program will be operated **entirely within a federally defined Qualified Census Tract(s)** (ONLY MARK YES IF ALL HOMES TO BE ASSISTED WITH CALHOME FUNDS SHALL BE LOCATED IN THE AREA(S) IDENTIFIED HERE):
Yes _____ No _____
Federally defined Qualified Census tract(s) No. _____
- C. Program will be operated **entirely within a designated redevelopment area under the jurisdiction of a local Redevelopment Agency** (ONLY MARK YES IF ALL HOMES TO BE ASSISTED WITH CALHOME FUNDS SHALL BE LOCATED IN THE AREA(S) IDENTIFIED HERE):
Yes _____ No _____
Attach a redevelopment area map and indicate program location on the map. **(Attach as Exhibit 2-3)**
- D. Nonprofit corporations must list the county or counties in which the program will be operated.
County/counties _____

SECTION VII. FINANCING

A. Proposed Financing (other than CalHome) (check all that apply):

☐ Federal HOME ☐ Redevelopment Agency ☐ Other

Describe the financing structure for any subordinate financing to be provided in addition to the CalHome loan. Do not list the CalHome loan:

Source of Financing	Proposed Lien Position*

***Note: Assume the existence of a first mortgage.**